24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		
Planned Parenthood Votes		C C00489799
Check if 24-hour report 48-hour report New report Amends report filed on 08 / 17 / 2016		
Full Name of Payee Latino Decisions		Date of Public Distribution/Dissemination
		08
Mailing Address 15 South Grady Way, Suite 620		Amount
City State Zip	p Code	13600.00
Seattle WA 98	8057	Transaction ID : B622315 Date of Disbursement or Obligation
Purpose of Expenditure Polling	Category/ Type 004	M 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	Sought: House District:
Hillary Clinton	Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought	Disbu 2016	ursement For: Primary
Full Name of Payee		Date of Public Distribution/Dissemination
76 Words		08
Mailing Address 1806 Vernon St, NW #100		Amount
City State Zi	p Code	82817.26
Washington DC 2	20009	Transaction ID : B622316 Date of Disbursement or Obligation
Purpose of Expenditure Ad production and commission-Estimated costs	Category/ Type 004	08 / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	e Sought: House District:
Pat Toomey	X Oppose	President State: PA
Calendar Year-To-Date Per Election for Office Sought	Disbu 2016	orsement For:
(a) SUBTOTAL of Itemized Independent Expenditures		96417.26
(a)		30411.20
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Deirdre Schifeling [Electronical	lly Filed] Date 0	17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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